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TO:	Examiner Ismael C. Quinones Group Art Unit 2686		
FROM:	Michael K. O'Neill		
RE:	U.S. Application No. 09/925,745 Our Ref.: 03500.015694		
FAX NO.:	(703) 872-9306		
DATE:	October 20, 2004	NO. OF PAGES:	10 <small>(including cover page)</small>
TIME:	3:20 PM	SENT BY:	Gina Barba

MESSAGE

Attached are the following papers for the above-identified application:

1. Amendment Transmittal
2. Supplemental Amendment

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OCT 20 2004

In re Application of:

Docket No. 03500.015694.

HARUHISA KATO

Application No.: 09/925,745

Examiner: Ismael C. Quinones

Filed: August 10, 2001

Group Art Unit: 2686

For: POWER CONTROL METHOD IN WIRELESS
COMMUNICATION DEVICE

Date: October 20, 2004

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13	MINUS	20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	5	MINUS	8	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--					\$0.00	\$0.00

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
Michael K. O'Neill
Registration No.: 32,622

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